	Effective on 12/09/200				AND THE PROPERTY AND THE PROPERTY AND THE			
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
FEE TRANSMITTAL				Application Number 10/521,040				
				g Date	8/16/2005			
For FY 2009				First Named Inventor H.J.T. Coelingh Bennink et al.			et al.	
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name Mei-Ping Chui				
				Art Unit 1616				
TOTAL AMOUNT OF PAYMENT (\$) 130.00			Attor	Attorney Docket 0470 - 050079				
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: The Webb Law Firm								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
FILING FEES SEARCH FEES EXAMINATION FEES								
Application Typ	Small E oe Fee (\$) Fee (		Small Entity		mall Entity	T	D.:1 (0)	
Utility	330 82		<u>Fee (\$)</u> 270	<u>Fee (\$)</u> 220	<u>Fee (\$)</u> 110	rees	Paid (\$)	
Design	220 110		50	140	70	E-11-11-11-11-11-11-11-11-11-11-11-11-11		
Plant						***************************************		
			165	170	85	***************************************	***************************************	
Reissue	330 165	540	270	650	325	·		
Provisional	220 110	0	0	0	0	**************************************		
2. EXCESS CLAIM FEES							Small Entity	
Fee Description Each claim over 20 (including Reissues)  Each claim over 20 (including Reissues)							Fee (\$)	
Each claim over 20 (including Reissues) 52 Each independent claim over 3 (including Reissues) 220							26 110	
Multiple dependent claims						390	195	
		ra Claims	Fee (\$)	Fee Paid (\$)			Dependent Claims	
32 -	38 =	0 x	0 =	<u> </u>		Fee (\$)	Fee Paid (\$)	
HP = highest number	of total claims paid for, if							
Indep. Claims		ra Claims	Fee (\$)	Fee Paid (\$)			***************************************	
HP = highest number	<u>3</u> = of independent claims pai	0 x	0 =					
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under								
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets	, ,	r of each add	itional 50 or frac	tion thereof	Fee (\$)	Fee Paid (\$)	
- 100 = /50 = (round <b>up</b> to a whole number) <b>x</b> =								
4. OTHER FEE(S)  Fees Paid (\$)								
Non-English S	Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): Petition for One-Month Extension of Time							130	
SUBMITTED BY								
	WWI LI		/ Re	gistration No.		m 1 1		
(Attorney/Agent) 22,132 Telephone 412-471-8815								
Name (Print/Type)	William H. Lo	gsdon				Date Octo	ber 1, 2009	